Environmental Issues Committee
MINUTES

May 30, 2002
2-4 pm
MD Dept. of the Environment

Strategy meeting our goals

The meeting began with a review of a draft chapter outline prepared for discussion purposes. A revised outline is attached to these minutes (with revisions underlined). These revisions reflect the thoughts of committee members expressed during this discussion.

Maryland Cancer Registry (MCR) Data

Stacy Neloms (MDHMH) presented a report on the capabilities of the Maryland Cancer Registry, with examples of the types of analyses the registry will support. The MCR contains information on demographics (census coded, but could be exact location in latitude/longitude), other risk factors (such as tobacco use, occupation, industry), cancer information (site, histology, type and subtype), diagnostic and treatment information, vital status, and facility information. Some of this information is collected well, some isn't. Some of the shortcomings can be improved by working with registrars to look for data that may be in the charts, etc. In other instances, information collected is not helpful, such as occupation, which is often listed as "retired." A chart showing Maryland's cancer ranking compared to the U.S. population was provided based on SEER data for the periods between 1990-1994 and 1995-1999. Between these two time periods, MD's adjusted mortality rates fell from 5th place for cancers of all sites to 9th place. For specific types of cancers, MD's rank position fell in most instances, except for Non-Hodgkin's lymphoma. Graphs of differences in MD incidence rates over time or in different age groups compared to the U.S. population (SEER) for individual cancer sites were also provided. SEER data now represent between 11-13% of the US population. This coming fall, however, they will be coming out with a combined data set that will represent 78% of the US population.

Occupational cancers of concern

Chris Loffredo reported information he learned at a recent NIOSH meeting on occupational cancers. Occupations of specific concern and associated cancers include: painters (leukemias, soft tissue cancers); farmers (soft tissue sarcomas, Non-Hodgkins lymphomas), workers exposed to metal fluids (esophageal, larynx, stomach and pancreatic cancers) and horticultural workers. Information on the number of people employed in these occupational categories in MD would be useful to our committee.

Shannon Brown provided tables summarizing information on specific cancer types for which there is evidence that exposure to chemical and physical agents are a causal factor. An analysis of the weight of evidence for the association was also provided. The committee felt that a table of this type of information should be included in our report, however, in the text of the chapter there should be a clear discussion of the

uncertainty involved in knowing what the exact etiology is for individual cases of cancer. Many members of the public think that all cancers are caused by hazardous chemical exposures, and don't recognize multiple causes.

Availability of databases for identifying and quantifying environmental chemicals

A number of existing environmental chemical databases were discussed, including MDE's ambient air monitoring data; EPA air emissions data for 1996; MDE groundwater data (1998-2002); and US Geological Society (USGS) data. The USGS database is somewhat difficult to use, for it's organized on a watershed basis, and thus crosses state boundaries. The information needed is difficult to tease out for local areas of concern. Other problems with the groundwater data include the limited frequency of the measurements, which are generally once a year and thus don't take into account seasonal differences in groundwater flow and/or chemical usage. For example, pesticides are applied primarily in the spring and summer. Also, the databases are limited with respect to the number of chemicals for which there are data (primarily just pesticides, nitrates/nitrites, and limited disinfection by-products). Being able to calculate exposure for individuals using groundwater data, or even county health department monitoring data for public drinking water supplies, is very difficult because it's difficult to determine where a person's water supply comes from.

Next meeting's agenda

The discussion of the availability and limitations of environmental databases for Maryland will be the primary topic for our next meeting on June 6, 2002. In addition, we will begin to address resources, policies and programs for prevention of environmental/occupational related cancers in Maryland. The suggestion was made that we should discuss a possible recommendation that the State should provide support for cancer prevention programs at university hospitals, such as the UM Comprehensive Cancer Center, or perhaps help to establish an environmental health training center.